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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

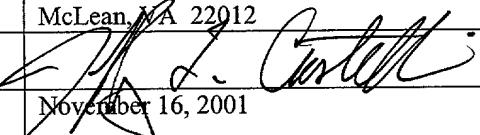
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/955,306
		Filing Date	September 19, 2001
		First Named Inventor	Futoshi KUNIYOSHI et al.
		Group Art Unit	1742
Examiner Name			
Total Number of Pages in This Submission		Attorney Docket Number	743421-43

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 with executed Declaration	<input checked="" type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Other
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jeffrey L. Costellia – Reg. No. 35,483 Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102
Signature	
Date	November 16, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Type or printed name	
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NVA204981.1

**FEET TRANSMITTAL
FOR FY 2001**

NOV 16 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$1,078.00)

Complete if Known	
Application Number	09/955,306
Filing Date	September 19, 2001
First Named Inventor	Futoshi KUNIYOSHI et al.
Examiner Name	
Group Art Unit	1742
Attorney Docket No.	743421-000043

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **19-2380**

Deposit Account Name **Nixon Peabody LLP**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
101	740	201 Utility filing fee	740.00
106	330	206 Design filing fee	
107	510	207 Plant filing fee	
108	740	208 Reissue filing fee	
114	160	214 Provisional filing fee	

SUBTOTAL (1) (\$740.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20**	= 5 X 168.00	
Independent Claims	5	-3**	
Multiple Dependent			

Large Entity Fee Code	Small Entity Fee Code	Fee Description
103	18	203 Claims in excess of 20
102	84	202 Independent claims in excess of 3
104	280	204 Multiple dependent claim, if not paid
109	84	209 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$168.00)

**or number previously paid, if greater; For Reissues, see above

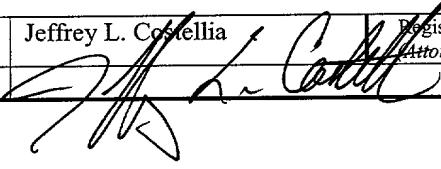
FEE CALCULATION (continued)				
3. ADDITIONAL FEES				
Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge – late filing fee or oath	130.00
127	50	227	25 Surcharge – late provisional filing fee or cover sheet	
139	130	139	130 Non-English transaction	
147	2,520	147	2,520 For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	200	200 Extension for reply within second month	
117	920	460	460 Extension for reply within third month	
118	1,440	720	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive – unavoidable	
141	1,280	241	640 Petition to revive – unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	40.00
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.29(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				
* Reduced by Basic Filing Fee Paid				
SUBTOTAL (3) (\$170.00)				

CERTIFICATE OF MAILING

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Name _____

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Jeffrey L. Costellia	Registration No. (Attorney/Agent)	35,483	Telephone (703) 790-9110
Signature			Date	November 16, 2001